

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the ifem(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

			on or each violation is specified in the narrative portion of t				
Establishn			,	Telephone Number	Date of Inspection (mm/dd/yr)		PERMIT#
Smoothie King				BIZ 945 5464			
Establishment Address (number and street, city, state, zip code)					10/31/2019 19-28		19-284
4214	Charles	<u>م بَ</u>	d (Suite 1) Now Albay, 12 47150	582 814 9700	· [
Омпер	211			Purpose:	Follow-up Release Date		
Bob and Dobbis McIlvoy Owner's Address				Routine	NO TODAT		
Owner's A	adress			2. Follow-up	Summary of Violations:		
Person in (Ol			3. Complaint	C NC R		
	M.T	٠.	•	4. Pre-Operational			
Responsibl				5. Temporary			
Responsi	e i cisom s	E-III	п	6. HACCP			
Certified F	and Mana	ner	<u> </u>	7. Other (list)			
	M.II				12 <u>X</u>	_3	45
		$\overline{}$					
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS				
• VIOLATIO	ON(S) REPE	ATE	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" A	AND IN THE NAR	RATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		To Be Corrected By		
19Z	C		Observed (2) confiners of Maccondit st	ما المتعمدات	- L L		
			Color 1	Letter 1162 to ter 30	st date		
	<u> </u>	_	(10/31/20)	* a.m.)			
	-	-		·			
<u> </u>	 	_		<u></u>			
<u> </u>	ļ						
							·
		_					<u> </u>
<u></u>							
				<u> </u>			
				• .	, <u> </u>		
	<u> </u>						
Received by	(name and	title r	rinted):	Inspected by (name and title p	winto#\:		
丁	. P	ُ ۽ ا	+ malo 1	_	•	A	:
Received by	(signature)	pe <u>r</u>	TMCLO		Ingram (EH	5)	
1		, ,)	Inspected by (signature):			
] ay			
cc:		/	cc:		ce:		
V					!		